

CHRONIC HEPATITIS

of the specimen, sweeping bands of delicate fibrosis about the edge of some fragments and a disorderly reticulin pattern within the parenchymal fragments (Figure 6). The diagnosis of macronodular cirrhosis may actually be missed and is notoriously difficult on needle biopsy if one chances to sample large regenerative nodules which closely mimic normal hepatic architecture. In summary, this patient has progressed from chronic active liver disease to an evolving cirrhosis.

Trade and Generic Names of Drugs

Diabinese® chlorpropamide
Imuran® azathioprine
Aldomet® α -methyl dopa

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Myasthenia Gravis

A paradox of myasthenia gravis is that lid retraction may be the presenting symptom. We think of ptosis as being the cardinal sign of myasthenia gravis; under certain circumstances lid retraction is the presenting sign . . . It occasionally happens that the superior rectus is involved or the muscles for upward gaze are involved more than the lids, and there's so much effort that's put into looking upward that a person gets a retraction of the lid secondarily—so it's a reasonable paradox.

—DAVID G. COGAN, MD, *Boston*
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